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Jan 21 2005

FAX COVER PAGE

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*If you do not receive the number of pages specified below, please notify:
Michelle Hardy, Legal Assistant to
Mr. Antony Edwards
Telephone (250) 861-5332 Fax: (250) 861-8772
mhardy@plerlaw.com*

OUR FILE: ACE-17432

TO: USPTO - Art Unit 3725
Examiner - Shelley M. Self

FAX NO.: 1-703-872-9306

FROM: Tony Edwards/Michelle Hardy

DATE: January 20, 2005

NUMBER OF PAGES
(Including cover page): 14

STATUS OF ORIGINAL: Will NOT be sent.
To follow by:
 mail courier

RE: United States CIP Patent Application No. 10/625,741 filed July 24, 2003

Attached are a Transmittal Form (PTO/SB/21), Fee Transmittal, Credit Card Authorization and Response to the Office Action mailed December 6, 2004 for the above-noted USCIP application.

PTO/SB/21 (02-04)

Approved for use through 07/31/2006. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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TRANSMITTAL FORM

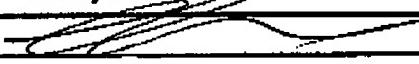
(to be used for all correspondence after initial filing)

Application Number	10/625,741		
Filing Date	July 24, 2003		
First Named Inventor	Rory Matthew Mitchell		
Art Unit	3725		
Examiner Name	Shelley M. Self		
Total Number of Pages in This Submission	13	Attorney Docket Number	ACE-17432

ENCLOSURES (Check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks NOTE: To clarify fees being paid: Fee for "One Month Extension to Reply" included - \$120.00 Total number of claims cancelled with Response = 12 Total number of claims added with Response = 11 One independent claim cancelled and one added No Additional Fees are required with regards to claims		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Antony C. Edwards		
Signature			
Date	January 21, 2005		

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Typed or printed name	Michelle Hardy		
Signature			
	Date	January 21, 2005	

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

PTO/SB/17 (12-04v2)

Approved for use through 07/31/2006. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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Effective on 12/08/2004.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL

For FY 2005

 Applicant claims small entity status. See 37 CFR 1.27TOTAL AMOUNT OF PAYMENT (\$)
120.00

Complete if Known

Application Number	10/625,741
Filing Date	July 24, 2003
First Named Inventor	Rory Matthew Mitchell
Examiner Name	Shelley M. Self
Art Unit	3725
Attorney Docket No.	ACE-17432

METHOD OF PAYMENT (check all that apply)

Check Credit Card Money Order None Other (please identify): _____

Deposit Account Deposit Account Number: 502297 Deposit Account Name: Petrarolia Langford Edwards & Rush

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee

Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 Credit any overpayments

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fee Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description

		Small Entity
Each claim over 20 (including Reissues)	Fee (\$)	Fee (\$)
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims
- 20 or HP = 0	x	=		Fee (\$)

HP = highest number of total claims paid for, if greater than 20.

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	
- 3 or HP = 0	x	=		Fee (\$)

HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(c)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
- 100 =	/ 50 =	(round up to a whole number) x		=

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): Filing Fee for one (1) month extension to reply (large entity) 120.00

SUBMITTED BY

Signature		Registration No. (Attorney/Agent) 40,288	Telephone 250-861-5332
Name (Print/Type)	ANTONY C. EDWARDS	Date	January 21, 2005

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

Attorney Docket No. ACE-17432

IN THE UNITED STATES PATENT & TRADEMARK OFFICE

Patent Examining Operations

Patent Application

Applicants: **Rory M. Mitchell et al.**
Title: **Apparatus for Sawing a Workpiece**
Application No. **10/625,741**
Filed: **July 24, 2003**
Examiner: **Shelley M. Self** Art Unit: **3725**

To: **Mail Stop Amendment
Director for Patents
Washington, D.C.
20231**

Dear Sir:

RESPONSE

In response to the Office Action mailed December 6, 2004, kindly amend this application as follows:

01/24/2005 BBONNER 00000039 10625741

01 FC:1251

120.00 OP